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approved Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMR control number. Complete if Known Effective on 12/08/2004. es pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818). 10/816,840 Application Number April 5, 2004 Filing Date For FY 2005 Conrad First Named Inventor Robert A. Hopkins **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1724 430.00 TOTAL AMOUNT OF PAYMENT Attorney Docket No. 12811-384 METHOD OF PAYMENT (check all that apply) Check Credit Card L Money Order None Other (please identify) 022095 Bereskin & Parr ✓ Deposit Account Deposit Account Number: Deposit Account Name: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card Information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES SEARCH FEES EXAMINATION FEES **FILING FEES** Small Entity **Small Entity Small Entity** Fee (\$) Fees Paid (\$) Fee (\$) Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$) 200 100 300 150 500 250 Utility 100 130 65 200 100 50 Design 160 80 200 100 300 150 Plant 500 600 300 300 150 250 Reissue 0 200 100 0 0 Provisional **Small Entity** 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description 50 25 Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 180 360 Multiple dependent claims Multiple Dependent Claims Fee Paid (\$) **Total Claims Extra Claims** Fee (\$) Fee Paid (\$) Fee (\$) 0.00 0 20 or HP = HP = highest number of total claims paid for, if greater than 20 Fee (\$) Fee Paid (\$) Indep. Claims Extra Claims 3 or HP = 0 X HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Fee Paid (\$) Fee (\$) **Total Sheets Extra Sheets** (round up to a whole number) x 0 Fees Paid (\$) 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other: Terminal Disclaimer-\$130, IDS-\$180, and Extension of time-\$120 430.00

SUBMITTED BY			
Signature	1 de la companya della companya dell	Registration No. 33,106	Telephone (416) 364-7311
Name (Print/Type	Philip C. Mendes da Costa		Date December 17, 2004

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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